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SEVENTH ANNUAL REPORT

OF THE

New York State Hospital

FOR THE CARE OF

Crippled and Deformed Children

FOR THE YEAR ENDING  
SEPTEMBER 30, 1907

HOSPITAL LOCATED AT WEST HAVERSTRAW, N. Y.  
(On the West Shore Railroad)

1907

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ALBANY

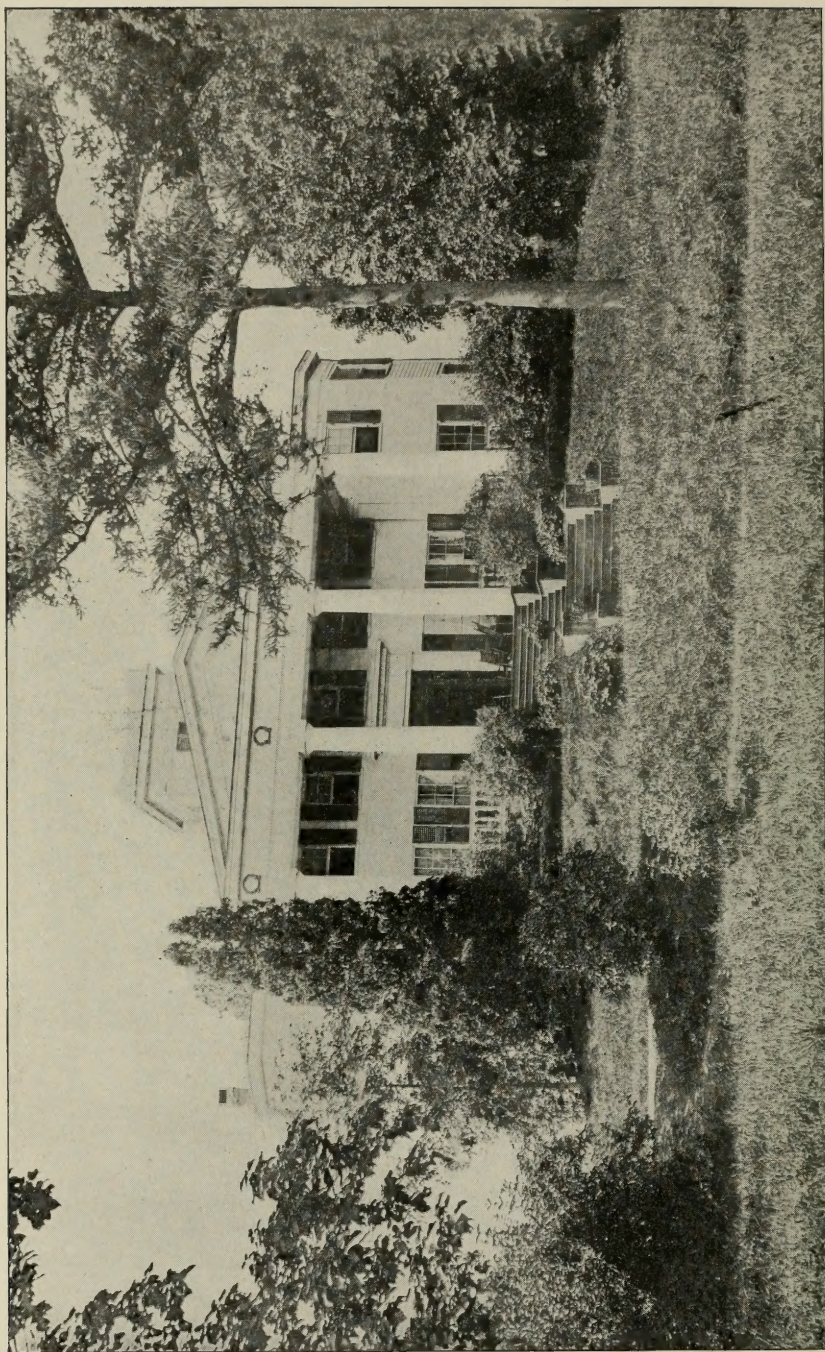
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1907



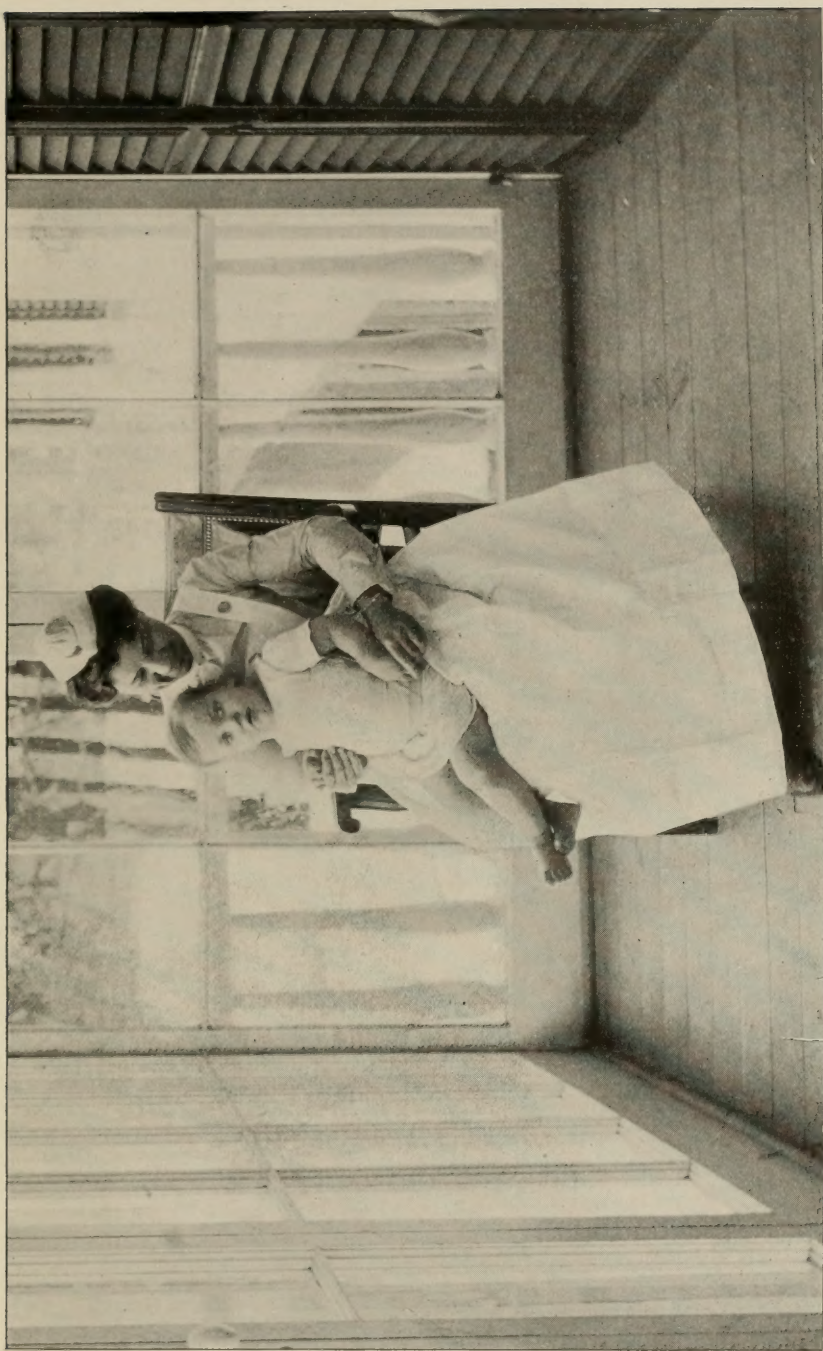






THE PRESENT BUILDING OF THE NEW YORK STATE HOSPITAL FOR THE CARE OF CRIPPLED AND DEFORMED CHILDREN AT WEST  
HAVERSTRAW, ROCKLAND COUNTY, NEW YORK.





LITTLE WALTER AND NURSE.



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## LOCATION OF THE HOSPITAL

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The present hospital building is located on the main highway in West Haverstraw, N. Y., about one-half mile from the West Shore Railroad Station, and about one-quarter of a mile from the Erie Railroad station.



## BOARD OF MANAGERS.

Appointed by the Governor of the State.

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THE RT. REV. HENRY C. POTTER, D. D.  
GEORGE BLAGDEN  
GEORGE W. THOMAS  
ROGERS H. BACON  
NEWTON M. SHAFFER, M. D.

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THE RT. REV. HENRY C. POTTER, D. D.

*Treasurer.*

GEORGE BLAGDEN

*Secretary.*

GEORGE W. THOMAS

*Executive Committee.*

NEWTON M. SHAFFER, M. D., *Chairman*  
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HENRY A. GATES, M. D., of Delhi, N. Y.

GRANT C. MEDILL, M. D., of Ogdensburg, N. Y.

FRANK W. SEARS, M. D., of Binghamton, N. Y.

JOHN SENGSTACKEN, M. D., of Stony Point, N. Y.

EUGENE B. LAIRD, M. D., of Haverstraw, N. Y.

### Consulting Orthopaedic Surgeons.

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T. HALSTED MYERS, M. D., of New York City.

### Special Consultants.

COLEMAN W. CUTLER, M. D., of New York City,

*Consulting Ophthalmologist.*

EDWARD D. FISHER, M. D., of New York City,

*Consulting Neurologist.*

CHARLES H. KNIGHT, M. D., of New York City,

*Consulting Laryngologist.*

GEORGE T. ELLIOT, M. D., of New York City,

*Consulting Dermatologist.*

WILLIAM P. NORTHRUP, M. D., of New York City,

*Consultant on Children's Diseases.*

### Attending Medical Staff.\*

*Surgeon-in-Chief*.....NEWTON M. SHAFFER, M. D.

*First Assistant Surgeon*.....P. HENRY FITZHUGH, M. D.

*Assistant Surgeon*.....JOHN JOSEPH NUTT, M. D.

*Assistant Surgeon*.....PERCY W. ROBERTS, M. D.

\* Dr. Fitzhugh and Dr. Roberts having resigned since the first of October, Dr. J. J. Nutt has been appointed as First Assistant Surgeon.



SEWING AND EMBROIDERY CLASS.





## EXECUTIVE OFFICERS.

*Superintenaent*.....THE SURGEON-IN-CHIEF.

(Non-Resident.)

Address: 28 East 38th Street, New York City.

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## Resident Officers.

*Resident Physician and Assistant Superintendent,*

HOWARD D. URQUHART, M. D.

*Matron*.....MISS GERTRUDE A. HOXIE.

*Stenographer*.....MISS BESSIE A. SMITH.

*Teacher*.....MISS HELEN PECOR.

*Trained Nurses*.....

{	MRS. MAE R. HUDSON.
	MRS. ELIZABETH FURLONG.
	MISS JENNIE A. WILLIAMS.
	MISS CATHERINE LEHANE.

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## Non-Resident Officer.

*Bookkeeper and Storekeeper (Acting Steward),*

EDWIN T. DUNN.

MY DEAR SIR:

With this I beg to transmit to you the report of the Surgeon-in-Chief of the New York State Hospital for the Care of Crippled and Deformed Children for the year ending September 30, 1907.

This report, I would add, has been submitted to the Board of Managers and adopted and approved by them.

I am, dear sir,

Very respectfully yours,

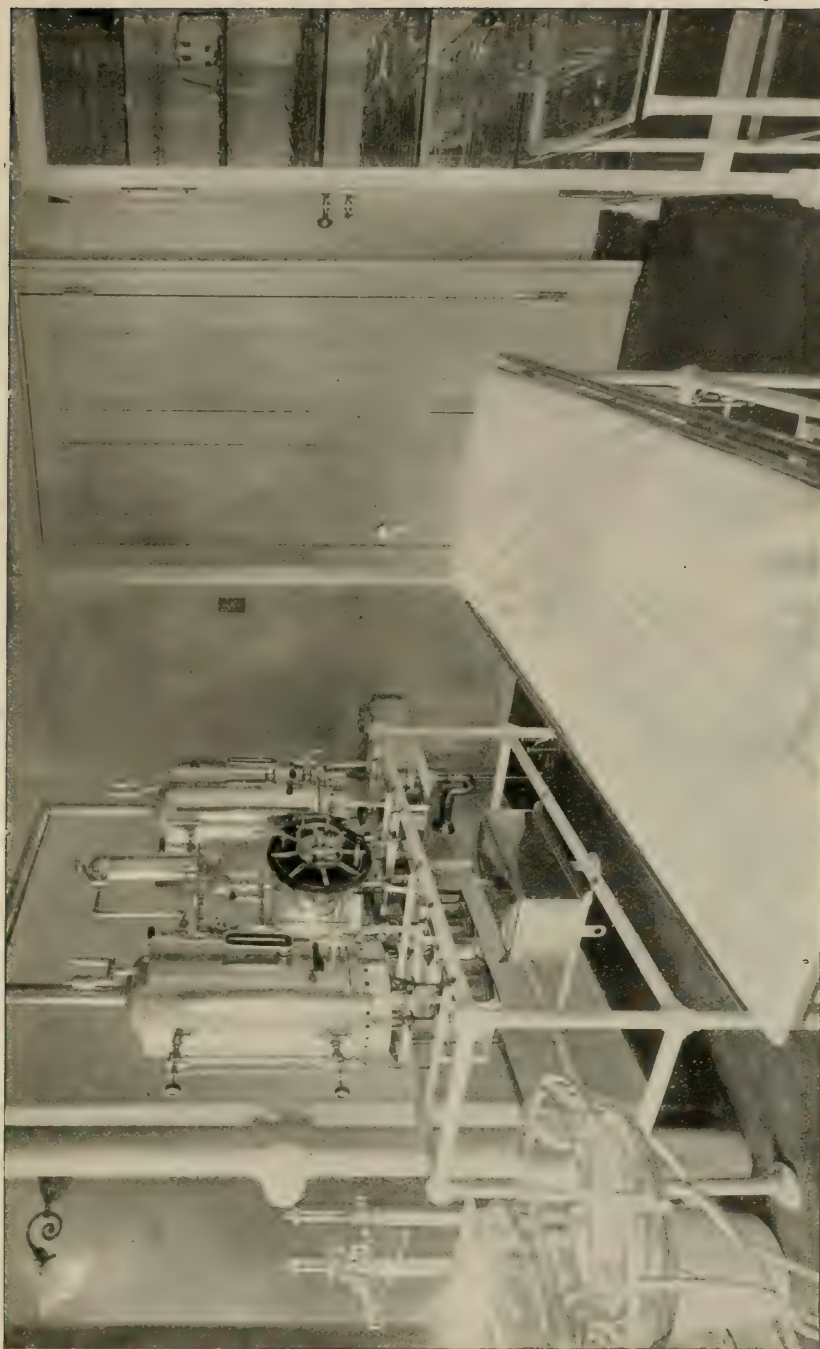
HENRY C. POTTER,

*President.*

The Hon. WILLIAM R. STEWART, *President.*

*November 11, 1907.*





THE OPERATING ROOM.



# TO THE BOARD OF MANAGERS OF THE NEW YORK STATE HOSPITAL FOR THE CARE OF CRIPPLED AND DEFORMED CHILDREN.\*

GENTLEMEN.—I have the honor of submitting for your consideration the following report of the work performed in your Hospital for the year ending September 30, 1907.

On the first day of October, 1906, there were 48 patients in the Hospital. During the year 20 new patients were admitted, making a total of 68 patients treated during the year. Of these, 22, or 32.35 per cent., were discharged, including one who died, leaving 46 under treatment on October 1, 1907.

Of the 22 discharged, 10 left the hospital cured, 9 were sent home much improved, with a tolerable certainty that ordinary home care would produce a practical cure. Two were summarily removed by parents, in opposition to the advice of the medical staff, and one patient died of tubercular meningitis.

Of the 46 under treatment on October 1, 1907, 26 were boys and 20 were girls.

The average daily attendance for the year was 46.74, and the total days of hospital care was 17,061.

The 46 patients under treatment on October 1, 1907, were subdivided, as to disease, as follows:

Hip joint disease .....	19
Pott's disease of the spine (humpback) .....	7
Acquired club foot (infantile paralysis) .....	5
Congenital dislocation of the hip joint .....	4
Knee joint disease (white swelling) .....	5
Congenital club foot .....	2
Bow legs .....	2
Lateral curvature of the spine .....	1
Congenital absence of the fibula .....	1
Total .....	46

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\* Read before the Board of Managers of the Hospital at the Stated Monthly Meeting of November 11, 1907. The report was duly approved, and ordered sent to the State Board of Charities.



Thirty-nine, or about 58 per cent., of the patients treated during the year, had some form of tuberculous joint disease. Of these, 39 (60 per cent.) had hip-joint disease, 15 per cent. had knee-joint disease, and 25 per cent. had spinal disease.

In this connection it is interesting to study our statistics from the opening of the Hospital in December, 1900. Our total admissions are 144, of which 98 have been discharged prior to October 1, 1907. Of these, 98, 32 have been discharged as cured, 57 as improved, 5 as unimproved (including some who were summarily removed by their parents), and 4 have died. We could have treated many times this number of patients if we had the proper facilities for their care.

In my last annual report I called your attention to the class of tuberculous joint and spinal diseases, which will probably always form the majority of the diseases treated in your Hospital. The treatment there outlined, viz.: the out-door, fresh-air treatment, has accomplished many comparatively rapid cures. Each patient has a properly applied, portative apparatus, protecting the joint invaded by the tuberculous process. This allows functional activity to all the other members of the body, confining only the affected parts. The readiness with which these little sufferers adapt themselves to the restraint of their apparatus, their activity and cheerfulness notwithstanding the apparent difficulty of locomotion, impresses all who have observed them as they walk and even run about the spacious lawns of the hospital enclosure. An ordinary fence is no obstacle to them. Croquet and a modified game of base ball are easily acquired. All simple active games are permitted. The efforts of the nurses are not in the direction of urging these affected children to activity. On the contrary, they have great difficulty in restraining their, oftentimes, excessive activity. Fresh air in the wards, active out-door life, in all sorts of weather, barring actual rain, snow, or boisterous wind storms, form the basis of our work among this tuberculous class. An open-air pavilion has been allowed by the State authorities, and will soon be erected. This will be of great service, especially in the winter, when it frequently happens that the weather conditions contraindicate locomotion in the open. During the past summer an ample tent, supplied by private contribution, has served as a shelter from the direct rays of the summer sun and storms. This is for several of our more afflicted patients, who are unable to walk, or whose condition make recumbency a necessary element of protection and treatment.



THE GIRLS' WARD.





It is not so long ago that this class of tuberculous patients with hip-joint disease, for example, were confined to bed, with a weight and pulley attached to their limbs, in poorly ventilated and crowded wards in the city. The modern treatment of pulmonary tuberculosis applies with equal force to the non-pulmonary tuberculous diseases. Our experience at this hospital strongly confirms this statement.

A study of the duration of treatment in your Hospital is also instructive. The average length of residence of patients is as follows:

Average duration of patients discharged, one year, three months and twenty-one days.

Average duration of patients now under treatment, one year, seven months and twenty-three days.

Average duration of both discharged and continued patients, one year, five months and twenty-two days.

We have now two patients with hip-joint disease under treatment, who have been in the hospital over five years. They are practically well, and as I have pointed out many times, it is poor policy on the part of the State to partially cure a child and then send it to his tenement house life and home to certain relapse. This we have tried to avoid. In the meantime, all those children are being educated in the elementary branches, and, in a simple way, are taught so far as our limited means allow, some trade or occupation.

Already we are hearing of our earlier discharged patients. Several are engaged in suitable occupations—as cashiers, stenographers, typewriters, milliners, bookkeepers, etc. But for the offices of this Hospital, some of these would have become permanent charges upon the State.

Applications for admission are very numerous. We have a list of over 200 now on file. There are many others which have been verbally received, of which no official note has been made. Over 300 have been received during the year.

It is worthy of note, that the existence of your Hospital in Haverstraw has awakened the interest of the philanthropists of this vicinity. Twenty-nine children, mostly eligible for admission, with deformity or deforming diseases, have been discovered, within a radius of four miles from the Hospital. Some of the most worthy have been admitted, while others have received attention outside of the Hospital, by the members of the medical staff. Had any one suggested that this number of crippled and deformed children

existed in this area a few years ago, the statement would, probably, have been discredited. The same conditions prevail, more or less, in every town in the State. It merely needs some interested local investigator to bring the facts to the surface. How can this interest be best brought about?

When the late Dr. Marion Sims, years ago, after his original work in gynaecological surgery, proposed to establish a "Woman's Hospital," he was met by the criticism that there were not enough patients of this class in the whole State of New York to fill a hospital of fifty beds. The writer distinctly remembers an interview between Dr. James Knight, the founder of the Hospital for the Ruptured and Crippled in New York City, and a well known prominent philanthropist of the time, during the late 60's, in which the latter opposed the erection of the present hospital in New York on the grounds that there were not enough cripples in New York to warrant the expenditure necessary to put up a large hospital, and that the then existing hospitals could care for them all. Stowed away in many a lonely hamlet, remote from observation and unrecognized by the social and charitable influences of their vicinity, there are thousands of crippled and deformed children in New York State, who can be made self-supporting and self-respecting citizens. This hospital affords them, or many of them, an opportunity to obtain relief.

By some people, your Hospital has been regarded as an asylum, or home, for crippled and deformed children. The writer once called attention to this error in the "New York Evening Post," and has always, whenever occasion arose, pointed out that the founders of the Hospital aimed primarily at hospital work—a hospital work which included treatment and care until the patient was cured. The writer has spent much time in declining applications from the utterly helpless and incurable crippled or deformed child, and he desires on this occasion to again call attention to the fact that the patients in the Hospital are cared for and educated, during a necessarily prolonged treatment, but that the institution is not an asylum. One of the rules adopted by your Board and approved by the State Board of Charities, says: "As this institution is a hospital and not an asylum or home, it should be clearly understood by each applicant, that the patient, if received, may be returned to the committing institution, parent, or guardian, at the discretion of the surgeon-in-chief." Ultimately it may be deemed wise by those in authority to establish an asylum or home for crippled and deformed children, who are helpless or incurable. But



THE BOYS' WARD





I think your Board should emphasize the statement, that this Hospital was organized for the benefit of those who can be helped or cured, and made self-supporting citizens.

I need not call your attention to the fact that our wards are overcrowded. The reason is plain. Almost daily applications are received for admission. Sometimes, when an urgent case applies, we err on the side of the suffering patient, and have often had 48 patients in the wards when we have only room for 45. But this ought not to go on. The demand for a modern hospital accommodating at least 400 patients, is apparent. Plans for this hospital, with one wing (and the administration building) accommodating 200 patients have been prepared by the State Architect and the Chairman of Your Executive Committee and approved by your Board. For several successive years we have applied to the State Legislature for the \$155,000 necessary to erect this building. We have ample grounds, an excellent site, and there are many hundreds of patients awaiting the favorable action on the part of the State. A willing medical staff, who volunteer their services, are anxious to proceed with the work. The writer trusts that your Board will cooperate with the proper authorities in Albany to secure the necessary appropriation.

Admission to the Hospital represents only 19 of the 61 counties of the State. These counties, with the admission from each, are given herewith. It will be noticed that Rockland county, in short, Haverstraw and its vicinity, stands second on the list, with 13 admissions, and this is exceeded only by New York county, which has 22. These two counties are the only ones representing double figures.

COUNTY.	ADMISSIONS.
Albany. . . . .	1
Broome. . . . .	1
Cayuga. . . . .	1
Dutchess. . . . .	2
Fulton. . . . .	1
Jefferson. . . . .	2
Kings. . . . .	7
Monroe. . . . .	1
Montgomery. . . . .	1
New York. . . . .	22
Oncida. . . . .	1
Orange. . . . .	5
Oswego. . . . .	2

COUNTY.	ADMISSIONS.
Queens, . . . . .	3
Rensselaer, . . . . .	1
Rockland, . . . . .	13
Sullivan, . . . . .	1
Tioga, . . . . .	1
Westchester, . . . . .	2
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	68
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Unless patients are committed by some magistrate or overseer of the poor, the surgeon-in-chief has no authority to detain a patient in the hospital, in opposition to the wishes of the parent or guardian. On several occasions patients have been summarily removed by a more or less hysterical or emotional parent or parents, when removal meant certain relapse. It would seem that some way should be devised by which the patients, once under treatment, should be kept under the care of the Hospital until such time as the surgeon-in-chief decided that the removal could be safely made.

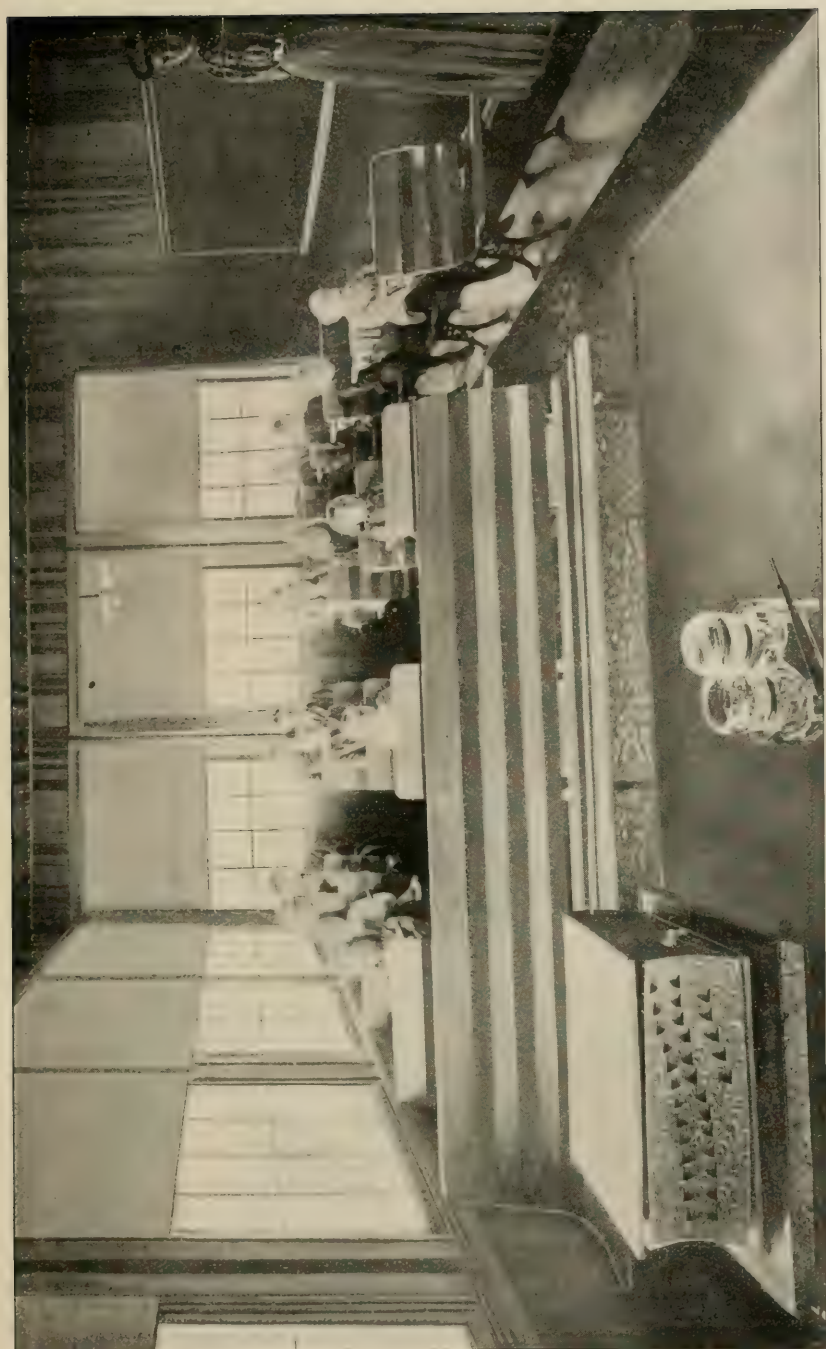
In addition to the State Hospital for Crippled and Deformed Children in Minnesota, Ohio in 1906 established an "Institution for the Treatment and Education of Deformed and Crippled Children." Three States of the Union have therefore extended relief to the Crippled and Deformed Child. The matter is being seriously discussed in several other States.

I desire to call your attention to the resignation of Dr. P. H. Fitzhugh and Dr. Percy W. Roberts from attending staff. Both of these officers have served the Hospital with zeal and faithfulness, the former being closely and actively identified with the work, as its first assistant surgeon, since the earliest days of its existence.

Dr. John J. Nutt has been appointed as an attending surgeon. He brings both experience and enthusiasm in his work.

The other members of the Hospital staff, including Dr. Laird and Dr. Sengstacken, of the local consulting staff, have rendered the Hospital much service that is of the best, and have aided your executive in many important, and sometimes trying, emergencies.

In conclusion I beg to call your attention to the accompanying tables which show in detail the medical and surgical work performed. They represent much conscientious work on the part of the assistant surgical staff, and show, in tabular form, the results of treatment.



THE SCHOOL ROOM.





A list of "Donations in Material," etc., will be found appended to the report. We desire to thank all those who have so kindly remembered the patients in the Hospital.

Respectfully submitted,

NEWTON M. SHAFFER, M. D.,  
*Surgeon-in-Chief and Superintendent.*

NEW YORK, November 11, 1907.

TABLE No. I.  
Summary of "Continued Patients."

Case number.	Date of admission.	Age, yrs.	Resident county.	Disease.	Application made' and indorsed by affidavit of—	Condition on admission as per last report.	Remarks.
1	April 11, 1901	9	Westchester.	Hip-joint disease.	Overseer of Poor.	Pain and extreme deformity; abscess; unable to walk	Discharged cured.
2	Oct. 30, 1901	4	New York...	Knee-joint disease	Mother.....	Knee bent at right angle; very much swelled and acutely painful. Abscess present. In bed six months. General condition very poor.	Discharged cured.
3	Nov. 4, 1901	5	Queens.....	Hip-joint disease.	Mother.....	In bad condition on entrance. Large abscesses discharging profusely. In bed for seven months. Hip much deformed. Critical condition.	General condition excellent. Abscess closed. Joint motion practically normal. Under observation pending discharge.
4	Dec. 17, 1901	7	Monroe.....	Knee-joint disease	Superintendent of poor.	Knee much deformed and very much swelled. Abscesses. Was regarded as a hopeless case. In bed four months.	Abscess absorbed. Limb straight. Good motion at knee. General condition excellent.
5	June 25, 1902	7	New York...	Hip-joint disease	Mother.....	Hip much contracted. Disease of long duration.	Condition excellent. Abscess healed.
6	April 21, 1903	4	Westchester.	Pott's disease) (humpback.	Grandmother.	Pain. Head twisted to one side. In poor condition.	Slight shortening. Deformity overcome. About to be discharged.
7	Oct. 10, 1903	10	Queens.....	Hip-joint disease.	Mother.....	Right leg one-half inch shorter than left. Very little motion in any direction of hip joint. Duration, five years. Beginning abscess.	General condition excellent. Spinal disease practically arrested. Head in good position.
8	Jan. 19, 1904	12	Queens.....	Hip-joint disease.	Mother.....	Two and one-half inches shortening of right limb. Marked muscular spasm. Very limited motion.	Condition much improved. Has had eight abscesses, all of which have healed except one. Good movement at hip joint.
9	June 16, 1904	4	Orange.....	Club foot.....	Father.....	Marked equino-varus of right foot. Very rigid. Congenital.	Deformity corrected. Good motion. Discharged greatly improved, wearing brace.
10	June 22, 1904	10	Cayuga.....	Bow legs.....	Superintendent of Charity and Mother.	Very marked bow legs with a sharp curve just above ankles. Disease of cervical spine. Also tubercular swelling of left wrist.	Osteotomy performed; limbs straightened. Wearing protective apparatus and is under observation.
11	July 18, 1904	11	Dutchess....	Pott's disease and tubercular disease of wrist.	Father.....	Marked flexion, with pain.....	Discharged cured.
12	Dec. 2, 1904	6	New York...	Hip-joint disease.	Father.....	Posterior dislocation of head of femur.....	Joint motion normal. Under observation prior to discharge.
13	Dec. 9, 1904	5	Fulton.....	Congenital dislocation of the hip joint.	Father.....	Posterior dislocation of head of femur.....	Discharged cured. Good motion and good formation of joint. Given three operations.

4	Orange	Jan. 13, 1905	Pott's disease (humpback).	Mother	Marked deformity in lower dorsal region. Pain; No increase in deformity. Condition difficult locomotion. Wearing apparatus.
15	Kings	Feb. 6, 1905	Hip-joint disease.	Mother	Slight deformity Very little movement of joint. . . . . Discharged with hip in good condition. Wears brace as a protection.
16	Kings	Mar. 14, 1905	Congenital club foot.	Mother	Aggravated deformity. . . . . Discharged very much improved. Wearing brace.
17	Orange	April 11, 1905	Pott's disease (humpback).	Father	Disease in lumbar region. Slight deformity. Pain. Deformity modified. Patient walks well. No increase in disease.
18	New York	May 9, 1905	Knee-joint disease	Father	Marked deformity of right knee; result of operation Greatly improved. Considerable motion for injury. Flexed to angle of 90 degrees. No perceptible movement. X ray gives appearance of ankylosis.
19	Tioga	June 17, 1905	Congenital club foot.	Father	Severe grade of congenital club foot. Patient in Patient cured but wearing apparatus very poor condition.
20	Oswego	June 20, 1905	Hip-joint disease.	Guardian	Extreme flexion of thigh. Very acute symptoms. Deformity overcome. Good motion in joint.
21	New York	July 19, 1905	Knee-joint disease	Mother	White swelling of right knee. Extremely acute. Joint condition much improved. Deformed to about 90 degrees. Very slight movement.
22	Kings	July 19, 1905	Hip-joint disease	Mother	Very acute symptoms. Two abscesses. Very little Abscesses closed. Good motion. Deformity nearly overcome.
23	New York	July 19, 1905	Knee-joint disease	Father	White swelling of right knee. Knee flexed to 90 degrees. Motion increased. Swelling reduced. Deformity overcome. General condition excellent.
24	Kings	Sept. 21, 1905	Congenital dislocation of hip-joint.	Father	Posterior dislocation. . . . . Dislocation reduced. Is under use of protective apparatus prior to discharge.
25	New York	Sept. 29, 1905	Hip-joint disease.	Superintendent Randall's land.	Very acute. Flexed to 150 degrees. No motion. No deformity. Patient progressing very satisfactorily.
26	New York	Sept. 29, 1905	Pott's disease (humpback).	Superintendent Randall's land.	Disease both in lumbar and upper dorsal region. Patient's condition very much improved. Wearing apparatus.
27	New York	Sept. 29, 1905	Club foot due to a burn.	Superintendent Randall's land.	Left club foot, due to cicatricial tissue, involving the tendon of the tibialis anticus muscle.
28	New York	Sept. 29, 1905	Club foot from infantile paralysis.	Superintendent Randall's land.	Right club foot, due to contraction of gastrocnemius muscle. Left club foot due to paralysis of gastrocnemius muscle.
29	New York	Sept. 29, 1905	Pott's disease (humpback).	Superintendent Randall's land.	Marked deformity in the dorsal region. . . . . Discharged improved.
30	Oswego	Oct. 5, 1905	Pott's disease.	Father	Disease in lumbar region. Moderate deformity. Abscess. Slight discharge. General condition enaciated.
31	New York	Nov. 7, 1905	Hip-joint disease.	Father	Moderate flexion deformity. Four inches shortened. Moderate atrophy. Acute symptoms present. Disease of eight years standing. Several previous relapses. General condition excellent.

TABLE No. I — (Continued).  
Summary of "Continued Patients."

Case number.	Date of admission.	Age, yrs.	Resident county.	Disease.	Application made and indorsed by affidavit of —	Condition on admission as per last report.	Remarks.
32.....	Jan. 24, 1906	12	Rockland....	Congenital club feet.	Aunt.....	Marked equino-varus deformity. General condition excellent.	Discharged cured.
33.....	Jan. 24, 1906	8	Rockland....	Congenital club feet.	Aunt.....	Marked equino-varus deformity. General condition excellent.	Discharged as greatly improved.
34.....	Jan. 25, 1906	11	Rockland....	Knee-joint disease.	Mother.....	Knee flexed to 175 degrees. Somewhat swollen. Lower end of femur appreciably thickened. Motion painful. No atrophy. General condition excellent.	Knee straight. Can be flexed beyond a right angle. No pain. Discharged cured.
35.....	Feb. 10, 1906	7	Rockland....	Acquired club foot from infantile paralysis.	Father.....	Moderate varus deformity. General condition excellent.	Discharged cured. Wearing a brace.
36.....	Mar. 5, 1906	10	Rockland....	Pott's disease....	Mother.....	Disease in lumbar region. Moderate kyphotic deformity. Intermitting pain. General condition good.	Discharged improved. Removed by mother.
37.....	Mar. 22, 1906	6	New York....	Hip-joint disease.	Father.....	Slight flexion. Marked spasm. No motion. Very acute symptoms. Slight thickening and induration over trochanter major. Night cries. General condition good; slight fever.	Joint motion excellent. No deformity.
38.....	May 15, 1906	4	New York....	Bow legs.....	Mother.....	Marked bony deformity of tibiae. Considerable ligamentous relaxation at knee. General condition excellent. Relapsed after operation made in a general hospital before admission here.	Apparatus applied. Deformity being reduced.
39.....	May 16, 1906	9	New York....	Pott's disease....	Father.....	Disease in upper dorsal region. Marked kyphotic deformity. Considerable pain. General condition fair.	Deformity under control. No pain. Patient wearing apparatus. General condition good.
40.....	May 29, 1906	13	Broome.....	Spastic paraplegia.	Aunt and guardian.	Spastic condition of both lower extremities. Talipes equinus deformity of both feet. General condition excellent.	Discharged improved, after operation.
1.....	June 5, 1906	5	Albany.....	Hip-joint disease.	Superintendent of Poor.	Marked degree of flexion and abduction. Marked muscular spasm. No motion. Very acute symptoms. Night cries. General condition good.	General condition excellent. Deformity partly overcome. Some movement at joint present.
.....	July 29, 1906	6	Kings.....	Acquired club foot from infantile paralysis.	Mother.....	Moderate equino-varus deformity of right foot. Contracted tendo-achillis. General condition excellent.	Tenotomy. Deformity overcome. Patient wearing apparatus. Under observation before discharge.



43.	July 31, 1906	4	New York...	Congenital dislocation of the hip-joint.	Father.....	Posterior dislocation. General condition good.....	Lorenz operation. Dislocation reduced. Under observation.
44.	Aug. 31, 1906	10	New York...	Bow legs.....	Mother.....	Very marked bony deformity of tibiae. General condition excellent.	Discharged cured.
45.	Sept. 14, 1906	9	Jefferson...	Pott's disease.....	Father.....	Well marked kyphotic deformity in upper dorsal region. General condition excellent.	Deformity under control. No abscess. Patient wearing apparatus under observation.
46.	Sept. 14, 1906	4	Rockland....	Hip-joint disease.	Mother.....	Moderate flexion and abduction. Marked muscular spasm. No motion. Very acute symptoms. Night cries. General condition good.	Deformity reduced. Joint motion very much improved. No night cries. General condition excellent.
47.	Sept. 27, 1906	7	Kings.....	Knee-joint disease	Father.....	Joint moderately swollen. Very tender. Position good. Marked muscular spasm. Five degrees of motion present. General condition fair.	Joint motion increased. Swelling reduced. Patient in excellent condition.
48.	Sept. 28, 1906	9	Rockland....	Acquired club foot from infantile paralysis.	Mother.....	Contracted tendo-achillis. Talipes equinus and talipes cavus of left foot. Shortened left lower extremity. Moderate atrophy of leg. General condition good.	Discharged cured as to the deformity.

TABLE No. II.—(Continuation of Table No. I.)  
*Summary of new patients received during the year.*

Case number.	Date of admission.	Age, yrs.	Resident county.	Disease.	Application made and indorsed by affidavit of—	Condition on admission as per last report.	Remarks.
49	Oct. 25, 1906	13	New York	Hip-joint disease.	Mother.	Right leg two inches shorter than left. Spasm marked. Very little motion present. Duration eleven years. Beginning abscess.	Abscess absorbed. Deformity overcome. Good movement at hip joint. General condition excellent. Walks well in apparatus. Cured.
50	Feb. 21, 1907	4	Chaumont	Club foot, congenital.	Mother.	Marked equino-varus of left foot. Foot and leg much atrophied.	Discharged improved. Wearing brace. Mother moved out of State.
51	Feb. 28, 1907	7	Rockland	Infantile paralysis of right lower extremity.	Father.	Almost complete paralysis of right lower extremity.	Knee still painful. Hip improved as to motion. Deformity much reduced.
52	Mar. 11, 1907	5	New York	Knee-joint disease, left and right hip.	Mother.	Knee flexed to right angle. Acutely painful. Night cries. General condition very poor.	Knee still painful. Hip improved as to motion. Deformity much reduced.
53	Mar. 14, 1907	6	Rockland	Hip-joint disease.	Father.	Deformity present. Joint very sensitive. Night cries.	General condition excellent. Movement good. Deformity much reduced. Pain absent.
54	Mar. 15, 1907	8	Rockland	Hip-joint disease.	Father.	Marked deformity. Joint locked in muscular spasm. Pain. Suffered greatly from loss of sleep.	Deformity about overcome. Pain absent. General condition excellent.
55	April 5, 1907	10	Orange	Hip-joint disease.	Mother.	Walks with limp. Abscess developing. Motion in joint only slightly limited.	Abscess absorbed. Joint in excellent condition.
56	April 23, 1907	10	Orange	Hip-joint disease.	Father.	Deformity, atrophy and marked muscular present.	Removed by father after fifteen days.
57	May 4, 1907	13	Rockland	Ankylosis of the knee and contracted tendons.	Sister Marcella.	Knee flexed.	Knee flexed to nearly a right angle. Under treatment with apparatus.
58	May 17, 1907	11	Rockland	Hip-joint disease.	Mother.	Limp, slight deformity and spasm present.	Joint motion normal. Patient practically cured. Under observation.
59	June 18, 1907	8	Oneida	Absence of fibula. Congenital. Absence of two toes.	Chas. E. Chase, M. D.	Left leg two inches shorter than right. General health good.	Doing well. Wearing apparatus.
60	July 2, 1907	14	New York	Lateral curvature of spine.	Mother.	Marked deformity. General health fair.	General condition improving. Under treatment.

61.....	July 6, 1907	13	New York...	Paralytic foot.	club	Mother.....	Equino-valgus of both feet. Deformity more marked in right foot. Removed by parent at end of two months.
62.....	July 30, 1907	14	Rensselaer...	Club foot.....		Mother.....	Former patient. Readmitted to have brace refitted. Brace refitted. Walks well.
63.....	Aug. 14, 1907	13	Montgomery...	Hip-joint disease.		Father.....	Moderate deformity. Spasm marked..... Deformity largely overcome. General health excellent.
64.....	Sept. 5, 1907	5	Kings.....	Congenital hip.....		Father.....	Posterior dislocation of head of femur. One inch shortening. Undergoing treatment preliminary to operation.
65.....	Sept. 5, 1907	7	Rockland....	Congenital hip.....		Mother.....	Posterior dislocation of right limb. One inch shortening. Undergoing treatment preliminary to operation.
66.....	Sept. 17, 1907	9	Dutchess....	Acquired club foot.		Father.....	Left club foot due to paralysis of gastrocnemius muscle. Apparatus applied. Walking well.
67.....	Sept. 23, 1907	6	New York....	Acquired club foot.		Father.....	Equino-varus of both feet, much more marked in left. Has greatly improved under use of traction apparatus.
68.....	Sept. 30, 1907	13	Sullivan....	Hip-joint disease.		Father.....	Three discharging sinuses. Hip condition improving. Wearing a brace. Three and a half inches shortening of left limb. Amyloid disease of kidney.

TABLE NO. III.  
*List of surgical operations performed during the year ending September 30, 1907.*

Case Number.	Age.	Date.	Disease.	Operation.	Remarks.
10 .....	10	July 30, 1907	Bow legs .....	Osteotomy of tibiae, under ether .....	Cured.
19 .....	4	Oct. 16, 1906	Congenital club feet .....	Manual over-correction under ether .....	Cured.
19 .....	4	July 30, 1907	Congenital club feet .....	Manual over-correction under ether (left), tenotomy (right) .....	Cured.
27 .....	4	Sept. 30, 1907	Club foot, due to a burn .....	Tenotomy under ether .....	Cured.
33 .....	12	Oct. 16, 1906	Club foot .....	Manual over-correction under ether .....	Improved.
42 .....	6	Sept. 30, 1907	Acquired club foot from infantile paralysis .....	Tenotomy under ether .....	Cured.
43 .....	4	Sept. 5, 1907	Congenital dislocation of the hip joint .....	Lorenz operation for reduction .....	Reduction made. Under observation.
48 .....	9	Oct. 16, 1906	Acquired club foot from infantile paralysis .....	Tenotomy under ether .....	Cured.
50 .....	4	Mar. 29, 1907	Congenital club foot .....	Manual over-correction under ether .....	Cured.
50 .....	4	July 9, 1907	Congenital club foot .....	Manual over-correction under ether .....	Cured.
50 .....	4	July 16, 1907	Congenital club foot .....	Tenotomy under chloroform .....	Cured.



TABLE NO. IV.  
Summary of discharged patients for the year ending September 30, 1907.

Case number.	Disease.	Condition on admission.	Date of discharge.	Condition on discharge.
1.....	Hip-joint disease.....	Pain and extreme deformity. Abcess. Unable to walk.....	Aug. 20, 1907 Cured.	
2.....	Knee-joint disease.....	Knee bent at right angle. Very much swelled and acutely painful. Abcess present. In bed six months. General condition very poor.	Sept. 1, 1907 Cured.	
8.....	Hip-joint disease.....	Two and one-half inches shortening of right limb. Marked muscular spasm. Very limited motion.	May 5, 1907 Improved.	
9.....	Club foot.....	Marked equino-varus of right foot. Very rigid. Congenital.....	April 9, 1907 Cured.	
11.....	Pott's disease and tubercular disease of wrist.....	Disease of cervical spine. Also tubercular swelling of left wrist.....	May 5, 1907 Cured.	
13.....	Congenital dislocation of the hip joint.....	Posterior dislocation of head of femur.....	May 2, 1907 Cured.	
15.....	Hip-joint disease.....	Slight deformity. Very little movement of joint.....	July 30, 1907 Improved.	
16.....	Congenital club foot.....	Aggravated deformity.....	Oct. 24, 1906 Improved.	
28.....	Club feet from infantile paralysis of gastrocnemius muscle.....	Right club foot, due to contraction of gastrocnemius muscle. Left club foot due to paralysis of gastrocnemius muscle.	Oct. 3, 1906 Improved.	
32.....	Congenital club feet.....	Marked equino-varus deformity. General condition excellent.....	May 28, 1907 Cured.	
33.....	Congenital club feet.....	Marked equino-varus deformity. General condition excellent.....	July 30, 1907 Improved.	
34.....	Knee-joint disease.....	Knee flexed to 175 degrees. Somewhat swollen. Lower end of femur appreciably thickened. Motion painful. No atrophy. General condition excellent.	Aug. 2, 1907 Cured.	
35.....	Acquired club foot from infantile paralysis.....	Moderate varus deformity. General condition excellent.....	Mar. 17, 1907 Cured.	
36.....	Pott's disease.....	Disease in lumbar region. Moderate kyphotic deformity. Intermittent pain. General condition good.	General May 3, 1907 Improved.	Discharged at parent's request.
40.....	Spastic paraplegia.....	Spastic condition of both lower extremities. Talipes equinus deformity of both feet. General condition excellent.	Gen-Sept. 28, 1907 Improved.	
44.....	Bow legs.....	Very marked bony deformity of Tibiae. General condition excellent.....	Mar. 2, 1907 Cured.	
48.....	Acquired club foot from infantile paralysis.....	Contracted Tendo-achillis. Talipes equinus and talipes cavus of left foot. Shortened left leg. General condition good.	Mar. 17, 1907 Cured.	
51.....	Infantile paralysis of right lower extremity.....	Moderate atrophy of leg. General condition good. Almost complete paralysis of right lower extremity.....	July 26, 1907 Improved.	Mother moved out of State.
56.....	Hip-joint disease.....	Deformity, atrophy and marked spasm present.....	May 7, 1907 Removed by father after fifteen days.	
61.....	Paralytic club foot.....	Equino-valgus of both feet. Deformity more marked in right foot.....	Sept. 8, 1907 Discharged improved. Removed by parent at end of two months.	
62.....	Acquired club foot.....	Former patient discharged. Readmitted to have brace refitted. No relapse has occurred.	Sept. 13, 1907 Brace refitted. Walks well.	

TABLE No. V.  
*Summary of deaths for the year ending September 30, 1907.*

Case number.	Deaths.	Cause of Death.
Oliver Thompson.....30	Feb. 15, 1907	Tubercular meningitis.

## Donations in Material, Etc.

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1906.

- Oct. 4. Frank Case, Haverstraw, N. Y., package of "Sunday School Advocates."
10. Frank Case, Haverstraw, N. Y., package of "Sunday School Advocates."
12. Mrs. O. R. Hughes, Haverstraw, N. Y., 1 boy's cap, 3 boys' blouses, 3 pair boys' pants, 2 suits boys' pajamas.
17. Frank Case, Haverstraw, N. Y., package of "Sunday School Advocates."
21. Charles and Harry Proffitt, Garnerville, N. Y., chestnuts for all the children.
22. Rev. C. C. Proffitt, Garnerville, N. Y., package of "Literary Digests."
22. Mrs. C. C. Proffitt, Garnerville, N. Y., bouquet of carnations.
- Nov. 3. Miss C. J. Spiro, Churchill Hall, Stamford, N. Y., 1 doll; 3 stuffed dogs; 5 stuffed cats; 4 silk bags; 5 satchel bags; 6 scrap books.
7. Master Philip Kimball, Onteora, Tannersville, N. Y., box of toys.
14. Frank Case, Haverstraw, N. Y., package of "Sunday School Advocates" and "Picture Lesson Papers."
28. Miss M. Gardner, West Haverstraw, N. Y., 1 bu. apples and bag of oranges, for Thanksgiving.
28. Dr. Newton M. Shaffer, 28 East 38th St., New York City, 10 lbs. layer raisins; 10 lbs. mixed nuts; 10 lbs. candy; 2 bunches of celery for Thanksgiving.
- Dec. 12. James Renn, Haverstraw, N. Y., five dollars in cash for Christmas presents for children.
15. Clarence Smith, Haverstraw, N. Y., 2 boxes Christmas toys.
17. Miss Ellen Murphy, West Haverstraw, N. Y., two dollars in cash for Christmas candy for children.
18. Dr. Newton M. Shaffer, 28 East 38th St., New York City, twenty-five dollars for Christmas cheer for the children.
19. Mrs. J. J. Nutt, New York City,  $\frac{1}{2}$  doz. films for moving picture machine.

- Dec. 20. Mrs. John B. Towers, Stony Point, Christmas books for the children.
22. Dr. Percy W. Roberts, 1 West 92nd St., New York City, 1 box oranges, a large box of useful articles for each child, including woolen mufflers, night gowns, etc.
22. Dr. J. J. Nutt, New York City, 40 lbs. nuts for children and resident staff.
24. Heminover Brothers, Garnerville, N. Y., 30 lbs. candy for the children.
24. Mrs. M. Washburn, Haverstraw, N. Y., Mrs Archer and others: 1 large box toys; 1 bag nuts and two barrels apples.
24. Calvin Tomkins, Tomkins Cove, N. Y., 2 barrels and 1 box of toys.
24. Miss M. Gardner, West Haverstraw, N. Y., 2 lbs. candy; 2 lbs. nuts; 1 doz. oranges; 4 picture books; 6 dolls; 4 boxes.
24. Mrs. J. T. Verdin, Haverstraw, N. Y., 1 box juvenile books and toys; scrap books and cards. (In behalf of the Loyal Temperance Legion of Haverstraw.)
24. Miss Mabel Welsh, 27 West 81st St., New York City, 8 night gowns; 25 fancy packages of candy; playing cards; 1 copy "Uncle Tom's Cabin;" one pencil box; 1 ball game, ice cream and cake for all.

1907.

- Feb. 8. Frank S. Allison, Haverstraw, N. Y., a quantity of picture books.
9. Judson & Post, Madison, N. Y., package of magazines.
9. Mrs. W. T. Purdy, Haverstraw, N. Y., package of magazines.
14. Dr. N. Leslie Bedle, Haverstraw, N. Y., 1 wall map of New York and the United States.
18. E. D. Heminover, Garnerville, N. Y., sleigh ride for the children.
18. Rev. C. C. Proffit, Garnerville, N. Y., bouquet of flowers.
19. Mrs. P. W. Roberts, 1 West 92nd St., New York City a quantity of night gowns.
- March 27. Mrs. J. C. Hand and Mrs. Adams, 28 New St., Catskill, N. Y., one Easter box containing reading matter; wearing apparel, toys, pop corn, candy and cakes.
28. Rev. W. A. Masker, Haverstraw, N. Y., package "Saturday Evening Mail."



- March 29. Mrs. Hillerman, Haverstraw, N. Y., package of magazines.
30. Mrs. Newton M. Shaffer, 28 East 38th St., New York City, 50 blooming plants for Easter.
31. Rev. C. C. Proffitt, Garnerville, N. Y., Easter bouquet of flowers.
- April 2. Miss A. J. Van Tine, Librarian of Church Periodical Club of St. Andrews Church, Fishkill-on-Hudson, N. Y., package of periodicals, calendars and Easter cards.
- May 1. Miss Fannie M. Rees, Madison Ave. Hotel, New York City, one box toys.
1. Rev. C. C. Proffitt, Garnerville, N. Y., 1 box magazines; bouquet of flowers.
11. Primary Class of Rock City Sunday School, Old Chatham, N. Y., a quantity of scrap books.
22. Society "Sons of Jacob" by Mrs. M. Warsauer, Haverstraw, N. Y., 5 lbs. mixed candy.
25. Miss Filor, Garnersville, N. Y., a quantity of magazines.
26. Rev. W. A. Masker, Haverstraw, N. Y., a quantity of cake.
- June 19. Mrs. O. R. Hughes, Haverstraw, N. Y., 1 package of boys' clothing.
19. Miss Fanny Rees, Madison Ave. Hotel, New York City, one package of clothing.
21. Miss Rodermand, Stony Point, N. Y., a quantity of magazines.
28. E. D. Heminover, Garnerville, N. Y., peanuts for all the children.
28. Dr. Newton M. Shaffer, 28 East 38th St., New York City, 1 tent with poles, and floor complete, size  $18\frac{1}{2} \times 18\frac{1}{2}$  ft.
- July 2. Dr. Newton M. Shaffer, 28 East 38th St., New York City, large quantity of fireworks for July 4th.
4. Henry F. Dorl, Haverstraw, N. Y., quantity of papers and magazines.
13. Mrs. John Sengstacken, Stony Point, N. Y., large quantity of flowers for children.
16. "K. I. D. Club" by Kathryn R. Stone, President, Whitehall, N. Y., quantity of children's picture books and scrap books.
23. Mrs. F. D. Gordon, 611 West 111th St., New York City, quantity of dresses for the girls, ready made.

- Aug. 27. Mr. Louis Bowers, Stony Point, N. Y., buns for all the children.
- Sept. 12. Mr. Louis Bowers, Stony Point, N. Y., cake for the children.
27. Mr. Louis Bower, Stony Point, N. Y., buns for all.



PATIENTS RESEATING CHAIRS.





## NOTE.

For the information of those interested, the following rules governing the admission of patients, and the forms of affidavit, are appended. Affidavit blanks will be forwarded upon application to the Surgeon-in-Chief, New York State Hospital for the Care of Crippled and Deformed Children, West Haverstraw, N. Y.

## RULES AND REGULATIONS

### GOVERNING THE ADMISSION OF PATIENTS TO

### New York State Hospital for the Care of Crippled and Deformed Children

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The New York State Hospital for the Care of Crippled and Deformed Children, established by the Legislature of 1900, is now open for the reception and treatment of patients.

The hospital was established "for the care and treatment of any indigent children who may have resided in the State of New York for a period not less than one year, who are crippled or deformed, or are suffering from a disease from which they are likely to become crippled or deformed."

The following conditions are imposed upon all applicants: "No patient shall be received except upon satisfactory proof made to the Surgeon-in-Chief, by the next of kin, guardian, or a State town or county officer, under the rules to be established by the Board of Managers, showing that the patient is unable to pay for private treatment. Such proof shall be by affidavit. If there was an attending physician before the patient entered the hospital, it shall be accompanied by the certificate of such physician giving the previous history and condition of the patient."

"Patients from four to sixteen years of age will be received for treatment, and all applications will be acted upon in the order of their reception. No patient will be admitted without an examination by, and a certificate from, the Surgeon-in-Chief, or in his absence, one of his assistants."

"No patient whose condition is such that death is likely to occur in the immediate future, or whose condition precludes a reasonable amount of relief as the result of treatment, will be admitted."

"As this institution is a hospital, and not an asylum or home, it should be clearly understood by each applicant that the patient, if received, may be returned to the committing institution, parent or guardian, at the discretion of the Surgeon-in-Chief."

It would aid the Surgeon-in-Chief very much in deciding upon the eligibility of a proposed candidate for admission, if, in addition to a written statement, giving the past history and present condition of the applicant, a photograph showing clearly the nature and location of the deformity should accompany the application. Application for admission should be made to Dr. Newton M. Shaffer, Surgeon-in-Chief, No. 28 East Thirty-eighth street, New York, who will appoint a time and place for the examination of the patient. Patients living at remote points in the State are referred to the following gentlemen (out-of-town members of the consulting Staff): Dr. A. Vander Veer and Dr. S. B. Ward, of Albany, N. Y.; Dr. Roswell Park and Dr. Charles G. Stockton, Buffalo, N. Y.; Dr. Richard B. Coutant, Tarrytown, N. Y.; Dr. J. Van Duyn and Dr. Henry L. Elsner, Syracuse, N. Y.; Dr. Henry A. Gates, Delhi, N. Y.; Dr. Grant C. Medill, Ogdensburg, N. Y.; Dr. Frank W. Sears, Binghamton, N. Y.; Dr. John Sengstacken, Stony Point, N. Y.; and Dr. Eugene B. Laird, Haverstraw, N. Y.

*Approved by the State Board of Charities and issued by order of the Board of Managers of the Hospital.*

**AFFIDAVIT BLANK**  
**FOR PARENTS AND GUARDIANS.**

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To NEWTON M. SHAFFER, M. D., *Surgeon-in-Chief*,  
No. 28 EAST 38th STREET, NEW YORK.

STATE OF NEW YORK,        )  
COUNTY OF.....        ) ss:  
..... being duly sworn, says that ..... is  
the ..... of ..... aged ..... years; that the said  
..... is suffering from .....; that ..... has  
resided in the State of New York for over one year, and that  
I as ..... am unable to pay for private treatment for  
the said .....

Name .....

Residence.....

.....

And further this deponent says not.  
Sworn to before me this ..... day of ..... 190..

# AFFIDAVIT BLANK

## FOR STATE, COUNTY OR TOWN OFFICERS.

To NEWTON M. SHAFFER, M. D., *Surgeon-in-Chief*,  
No. 28 EAST 38th STREET, NEW YORK.

STATE OF NEW YORK,        }  
COUNTY OF.....} ss.:  
.....being duly sworn, says that he  
is the ..... officer in the ..... of .....  
.....New York State; that he is acquainted with the  
position and circumstances of .....; that the said  
..... is ..... years of age; that .....  
is suffering from .....; that ..... has resided in the  
State of New York for over one year, and that ..... is unable  
to pay for private treatment for ..... condition.

Name .....

Residence.....

And further this deponent says not.  
Sworn to before me this ..... day of ..... 190..









